

# PAPERWORK REDUCTION ACT SUBMISSION

**Please read the instructions before completing this form. For additional forms or assistance in completing this form, contact your agency's Paperwork Clearance Officer. Send two copies of this form, the collection instrument to be reviewed, the supporting statement, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW, Washington, DC 20503.**

1. Agency/Subagency originating request	2. OMB control number <span style="float: right;">b. <input type="checkbox"/> None</span> a. _____ - _____
3. Type of information collection ( <i>check one</i> ) a. <input type="checkbox"/> New Collection b. <input type="checkbox"/> Revision of a currently approved collection c. <input type="checkbox"/> Extension of a currently approved collection d. <input type="checkbox"/> Reinstatement, without change, of a previously approved collection for which approval has expired e. <input type="checkbox"/> Reinstatement, with change, of a previously approved collection for which approval has expired f. <input type="checkbox"/> Existing collection in use without an OMB control number For b-f, note Item A2 of Supporting Statement instructions	4. Type of review requested ( <i>check one</i> ) a. <input type="checkbox"/> Regular submission b. <input type="checkbox"/> Emergency - Approval requested by _____ / _____ / _____ c. <input type="checkbox"/> Delegated
	5. Small entities Will this information collection have a significant economic impact on a substantial number of small entities? <input type="checkbox"/> Yes <input type="checkbox"/> No
	6. Requested expiration date a. <input type="checkbox"/> Three years from approval date b. <input type="checkbox"/> Other Specify: _____ / _____
7. Title	
8. Agency form number(s) ( <i>if applicable</i> )	
9. Keywords	
10. Abstract	
11. Affected public ( <i>Mark primary with "P" and all others that apply with "x"</i> ) a. <input type="checkbox"/> Individuals or households d. <input type="checkbox"/> Farms b. <input type="checkbox"/> Business or other for-profit e. <input type="checkbox"/> Federal Government c. <input type="checkbox"/> Not-for-profit institutions f. <input type="checkbox"/> State, Local or Tribal Government	12. Obligation to respond ( <i>check one</i> ) a. <input type="checkbox"/> Voluntary b. <input type="checkbox"/> Required to obtain or retain benefits c. <input type="checkbox"/> Mandatory
13. Annual recordkeeping and reporting burden a. Number of respondents _____ b. Total annual responses _____ 1. Percentage of these responses collected electronically _____ % c. Total annual hours requested _____ d. Current OMB inventory _____ e. Difference _____ f. Explanation of difference 1. Program change _____ 2. Adjustment _____	14. Annual reporting and recordkeeping cost burden ( <i>in thousands of dollars</i> ) a. Total annualized capital/startup costs _____ b. Total annual costs (O&M) _____ c. Total annualized cost requested _____ d. Current OMB inventory _____ e. Difference _____ f. Explanation of difference 1. Program change _____ 2. Adjustment _____
15. Purpose of information collection ( <i>Mark primary with "P" and all others that apply with "X"</i> ) a. <input type="checkbox"/> Application for benefits e. <input type="checkbox"/> Program planning or management b. <input type="checkbox"/> Program evaluation f. <input type="checkbox"/> Research c. <input type="checkbox"/> General purpose statistics g. <input type="checkbox"/> Regulatory or compliance d. <input type="checkbox"/> Audit	16. Frequency of recordkeeping or reporting ( <i>check all that apply</i> ) a. <input type="checkbox"/> Recordkeeping b. <input type="checkbox"/> Third party disclosure c. <input type="checkbox"/> Reporting 1. <input type="checkbox"/> On occasion 2. <input type="checkbox"/> Weekly 3. <input type="checkbox"/> Monthly 4. <input type="checkbox"/> Quarterly 5. <input type="checkbox"/> Semi-annually 6. <input type="checkbox"/> Annually 7. <input type="checkbox"/> Biennially 8. <input type="checkbox"/> Other (describe) _____
17. Statistical methods Does this information collection employ statistical methods <input type="checkbox"/> Yes <input type="checkbox"/> No	18. Agency Contact (person who can best answer questions regarding the content of this submission)  Name: _____ Phone: _____

## 19. Certification for Paperwork Reduction Act Submissions

On behalf of this Federal Agency, I certify that the collection of information encompassed by this request complies with 5 CFR 1320.9

**NOTE:** The text of 5 CFR 1320.9, and the related provisions of 5 CFR 1320.8(b)(3), appear at the end of the instructions. *The certification is to be made with reference to those regulatory provisions as set forth in the instructions.*

The following is a summary of the topics, regarding the proposed collection of information, that the certification covers:

- (a) It is necessary for the proper performance of agency functions;
- (b) It avoids unnecessary duplication;
- (c) It reduces burden on small entities;
- (d) It used plain, coherent, and unambiguous terminology that is understandable to respondents;
- (e) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;
- (f) It indicates the retention period for recordkeeping requirements;
- (g) It informs respondents of the information called for under 5 CFR 1320.8(b)(3):
  - (i) Why the information is being collected;
  - (ii) Use of information;
  - (iii) Burden estimate;
  - (iv) Nature of response (voluntary, required for a benefit, mandatory);
  - (v) Nature and extent of confidentiality; and
  - (vi) Need to display currently valid OMB control number;
- (h) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected (see note in Item 19 of instructions);
- (i) It uses effective and efficient statistical survey methodology; and
- (j) It makes appropriate use of information technology.

If you are unable to certify compliance with any of the provisions, identify the item below and explain the reason in Item 18 of the Supporting Statement.

Signature of Senior Official or designee

Date

Agency Certification (signature of Assistant Administrator or head of MB staff for L.O.s, or of the Director of a Program or Staff Office)	
Signature	Date
Signature of NOAA Clearance Officer	
Signature	Date

**SUPPORTING STATEMENT FOR THE  
APPLICATION FOR THE MARINE MAMMAL AUTHORIZATION PROGRAM  
UNDER SECTION 118 OF  
THE MARINE MAMMAL PROTECTION ACT**

A. Justification:

1. Explain why you need to conduct the information collection.

The Marine Mammal Protection Act (16 U.S.C. 1361 et seq.; MMPA or the Act) mandates the protection and conservation of marine mammals. The killing or serious injury of marine mammals, except under permit or authorization, is a violation of the Act. An authorization for commercial fisheries is provided under Section 118 of the MMPA provided that the fishers apply for and receive general permits and individual certificates of inclusion in that fishery. Fishing vessels engaged in a fishery identified by NMFS as having either frequent (Category I) or an occasional (Category II) taking of a marine mammal must register with the Secretary in order to obtain an authorization for taking marine mammals and to be legally operating in that fishery. Fishers operating in fisheries identified by NMFS as having only a remote chance (Category III) to take marine mammals need not apply.

2. Explain how, by whom, how frequently, and for what purpose the information will be used.

The information to obtain an authorization is supplied by the fisher operating in a Category I and II fishery as mandated by Section 118 (c)(2)(A) of the MMPA. The MMPA states: "An authorization shall be granted by the Secretary in accordance with this section for a vessel engaged in a commercial fishery listed under paragraph (1)(A)(I) or (ii) upon receipt by the Secretary of a completed registration form providing the name of the vessel owner, the name and description of the vessel, the fisheries in which it will be engaged, the approximate time, duration, and location of such fishery operations, and the general type and nature of use of the fishing gear and techniques used."

A valid certificate of authorization protects the fisher from prosecution under the MMPA for violation of the moratorium on taking marine mammals. Without the information collection, NMFS would be unaware of the need for the fisher to be included under the authorization system. The information needed to register, renew, or update a commercial fishery authorization is found at 50 CFR 229.4 and includes the following:

- a. Name, address, and telephone number of the vessel owner and name and address of the operator if other than the owner;

- b. Name and length of the vessel, home port and U.S. Coast Guard documentation number, State registration number or State commercial license of the fishing vessel which will operate under the authorization;
- c. A list of the fishery(s) in which the vessel will be engaged and the approximate time, duration, and location of each fishery, including the general type and nature of gear and techniques used; and
- d. A certification of the accuracy of the information being submitted.

Modifications to (1) or (3) above must be within 30 days of any change. To facilitate the application process, NMFS mails application forms or renewal forms to all fishers identified within the Category I and II fisheries. Renewal forms are pre-filled out by a computer generated with previously submitted information, allowing the fishers to make modifications to the form instead of filling out a new form.

Most of the information requested above is required by statute, NMFS determined that the home port and the length of the vessel were necessary information. This information is vital for the mandatory observer program for Category I and II fisheries. Information concerning the time, duration, and location of fishery operations, and the type and nature of gear is mandated by the MMPA. The MMPA requires NMFS to establish an observer program for Category I and II fisheries; therefore the home port and the size of the vessel is required because NMFS will need to know the location for boarding the vessel, and whether the vessel is large enough to take an observer. While this additional information is required only for participants in Category I and II fisheries, the categories are subject to change. Specific additional information may be required of Category I fishers under section 229.4 (b)(3) to facilitate boarding observers.

Certain information available elsewhere may be used to assist and /or verify the information collection request for registrations. For example, copies of existing State fishing licenses, federal fishing license applications, or foreign fishing permit applications may be used for this information request. Not all fishers have an interaction problem with marine mammals. Therefore, short of registering all U.S. fishers through State licenses and requiring all U.S. fishers to send in annual reports for renewal of their certificates, the submission of an application to receive an authorization is the best alternative for keeping the burden to a minimum.

3. Describe whether, and to what extent, the collection of information involves the use of automated, electronic, mechanical, or other technological techniques or other forms of information technology.

Fishers need only to mail in the authorization form, which is made available to them in the NMFS regions, and through fishery organizations, at docks, etc. Renewal notifications are pre-filled out by computer; the fishers need only to make any corrections and sign.

Authorization forms must be returned to NMFS via mail accompanied by the required registration fee.

4. Describe your efforts to identify duplication with other collections, which may be gathering the same or similar information. If the same or similar information is available, describe why it cannot be used or modified for the purposes described in "2" above.

Fishers in Category I or II fisheries are statutorily required to submit the information in the authorization form to lawfully take marine mammals incidental in fishing operations. The authorization is granted on an annual basis.

Some states have integrated the NMFS registration process into the existing state fishery registration process and are exempt from filing a federal registration. Many states are not automated and NMFS, in order to reduce burden, has automated its authorization system. Federal fishing permits are limited in the number of fisheries that are included in the system. Therefore, a single licensing system for the authorization was the only option available.

Although NMFS has joint authority with the U.S. Fish and Wildlife Service (USFWS), Department of Interior, to manage marine mammals, the U.S. Department of Interior has not been authorized by statute to promulgate regulations on this matter. Therefore, USFWS has not established its own registration and reporting system. NMFS continues to consult with the USFWS on this matter and a USFWS staff person has attended task force meetings with NMFS, but NMFS remains responsible for the information collection process, distributing authorizations, and maintaining the marine mammal reporting system.

5. If the collection will have a significant impact on small entities such as small businesses, organizations, or government bodies, describe the methods used to minimize the burden on them.

This collection will not have a significant impact on small entities. The MMPA instructs the Secretary to develop, in consultation with the appropriate states, Regional Fishery Management Councils, and other interested parties, the means by which the granting and administration of authorizations shall be integrated and coordinated with existing fishery licenses, registrations, and related programs, to the maximum extent practicable. However, as mentioned in item 4 above, to date, some state license systems do not appear to be compatible.

6. Describe the consequences to Federal program or policy activities if the collection would not be conducted or would be conducted less frequently.

Commercial fishery authorization applications are required annually as mandated by statute (16 U.S.C. 1407 (b)(2)(A)). Without the registrations, NMFS would be unable to

execute its observer program and to determine the impact of U.S. commercial fisheries on marine mammal populations and stocks.

7. Explain any special circumstances that require the collection to be conducted in a manner inconsistent with the OMB guidelines.

The collection is consistent with 5 CFR 1320.6.

8. If applicable, provide a copy of the PRA Federal Register notice that solicited public comments on the information collection prior to this submission. Summarize the public comments received in response to that notice and describe the actions taken by the agency in response to those comments. Describe your efforts to consult with persons outside the agency to obtain their views on the availability of data, the frequency of collection, the clarity of instructions, the amount of burden to be imposed, and ways to minimize the burden.

The request for reauthorization of the collection was published on July 13, 1999 (64 FR 37751), requesting comments on the reporting burden. To date no comments have been received.

The MMPA amendments which these regulations address were designed by a coalition of environmental, fishing industry, and Congressional staff in response to fishers requests that logbooks no longer be required. The old logbook reporting system was replaced by reporting only when a take occurs. This results in a lesser burden to the fishers. The fishing industry representatives testified that this procedure was acceptable to most fishers and that they would submit the acceptable data.

9. Explain any decision to provide any payment or gift to respondents, other than remuneration of contractors or grantees.

There is no provision to provide any payment or gift to respondents.

10. Describe any assurance of confidentiality provided to respondents and the basis for this assurance in statute, regulation, or agency policy.

The MMPA amendments mandate that information submitted for vessel applications will be made available to the general public only in aggregate form.

11. Provide additional justification for any questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, or other matters that are commonly considered private.

No sensitive questions are asked.

12. Provide an estimate in hours of the burden of the collection of information.

The number of burden hours in the general public is directly proportional to the number of applicants that wish to be covered.

NMFS has estimated that there are 22,400 fishing vessels that can be included in either a Category I or II fishery and therefore will need to register for an authorization and obtain a decal and certificate noting that they are exempt from prosecution. However, based on experience with the general permit program, less than full compliance was noted. Through enforcement actions against fishermen for failure to apply and prohibiting fishermen from fishing unless they have an authorization, applications would not be expected to decrease and might possibly increase in the final years of the program.

Some states have integrated the NMFS registration process into the existing state fishery registration process and are exempt from filing a federal registration. The annual burden hours for Category I & II fisheries are estimated as:

- New applications: 200 vessels x 15 minutes/application\*/year = 50 hours
- Renewal applications: 3,800 vessels x 9 minutes/application/year = 570 hours

(\*As fishermen are expected to apply for any additional fisheries at the time of the initial application, no additional burden hours are warranted for multiple fishery applicants.)

13. Provide an estimate of the total annual cost burden to the respondents or recordkeepers resulting from the collection.

The annual costs to the Category I & II fishers to apply for authorization annually is estimated as follows:

Application fee, \$25 plus postage, \$.33 = \$25.33 per applicant/year.  
4,000 applications x \$25.33/application = \$101,320

14. Provide estimates of annualized cost to the Federal government. Also, provide a description of the method used to estimate costs, which should show the quantification of hours, operational expenses (such as equipment, overhead, printing, and staff support), and any other expense which would not have been incurred without this collection of information. You may aggregate cost estimates from Items 12, 13, and 14 in a single table.

The fee recovers all federal processing costs.

15. Explain the reasons for any program changes or adjustments reported in Items 13 or 14 of the OMB 83-I.

The changes in burden result for a reinstatement of an expired approval.



16. For collections whose results will be published, outline the plans for tabulation and publication. Address any complex analytical techniques that will be used. Provide a time schedule for the collection, publication, and other actions.

The results of this collection are not for publications.

17. If seeking approval to not display the expiration date for OMB approval of the information collection, explain the reasons why display would be inappropriate.

NMFS is not requesting approval to not display the expiration.

18. Explain each exception to the certification statement identified in Item 19 of the OMB 83-I

No exception requested.



# MARINE MAMMAL AUTHORIZATION PROGRAM

## Registration Form

Regulations implementing section 118 of the Marine Mammal Protection Act (50 CFR 229.4) requires the owner of a commercial fishing vessel engaged in a Category I or II fishery to obtain an authorization for the incidental take of marine mammals. Failure to obtain an authorization, or to maintain a current and valid authorization, shall subject vessel owners to the penalties of the Marine Mammal Protection Act. If you will be participating in one of the Category I or II fisheries listed on the insert of this application, complete the following:

Please **PRINT LEGIBLY and in CAPITAL LETTERS**, all responses in the blocks provided. See page 6 for complete instructions.

<b>VESSEL NAME</b>	<b>VESSEL STATE REG. NO. / COAST GUARD DOC. NO.</b>	<b>LENGTH (Ft)</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>HOME PORT OF VESSEL - CITY</b>	<b>STATE</b>	<b>COMM. VESSEL LIC. NO.</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>

<b>LAST NAME OF PRIMARY VESSEL OWNER</b>	<b>FIRST NAME OF PRIMARY VESSEL OWNER</b>	<b>M.I.</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>LAST NAME OF SECONDARY VESSEL OWNER (if applicable)</b>	<b>FIRST NAME OF SECONDARY VESSEL OWNER</b>	<b>M.I.</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**CORPORATE NAME (if applicable)**

**MAILING ADDRESS (for business correspondence)**

<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>

<b>TELEPHONE NUMBER (including area code)</b>	<b>SOCIAL SECURITY NO. (optional - AK only)</b>
<input type="text"/>	<input type="text"/>

<b>LAST NAME OF OPERATOR (if different than owner)</b>	<b>FIRST NAME OF OPERATOR</b>	<b>M.I.</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**MAILING ADDRESS (for business correspondence)**

<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>

<b>TELEPHONE NUMBER (including area code)</b>	<b>SOCIAL SECURITY NO. (optional - AK only)</b>
<input type="text"/>	<input type="text"/>

**For Administrative Use Only:**

☐ M.O. ☐ Check No. \_\_\_\_\_ Received By: \_\_\_\_\_ Date: \_\_\_\_\_ Certificate Issued By: \_\_\_\_\_ Date: \_\_\_\_\_

## MARINE MAMMAL AUTHORIZATION PROGRAM

## Certification

I HEREBY CERTIFY, UNDER PENALTY OF PERJURY, THAT I AM THE OWNER OF THE ABOVE NAMED VESSEL (OR NON-VESSEL FISHING GEAR), OR THAT I AM AUTHORIZED TO REGISTER FOR THIS AUTHORIZATION ON BEHALF OF THE OWNER, THAT I HAVE REVIEWED ALL INFORMATION CONTAINED IN THIS DOCUMENT, AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

**Signature**

Date \_\_\_\_\_

**IF THIS REGISTRATION IS SIGNED BY A PERSON OTHER THAN THE OWNER OR AUTHORIZED REPRESENTATIVE OF THE ABOVE-NAMED VESSEL, PLEASE COMPLETE THE FOLLOWING:**

LAST NAME OF REPRESENTATIVE

[illegible]

FIRST NAME OF REPRESENTATIVE

[illegible]

M.I.

7

**ADDRESS**

[illegible]

CITY

[illegible]

STATE

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ZIP CODE

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**Mail this completed registration form,  
along with a check in the amount of \$25.00, payable to the National Marine Fisheries Service,  
to the nearest NMFS regional office listed below.  
(Please allow 30 days for processing):**

**Sandra Arvilla**  
**NMFS Northeast Region**  
**One Blackburn Dr**  
**Gloucester, MA 01930**  
**978 / 281-9255**  
**e-mail: [sandra.arvilla@noaa.gov](mailto:sandra.arvilla@noaa.gov)**

**Joyce Mochrie**  
**NMFS Southeast Region**  
**9721 Executive Center Dr North**  
**St. Petersburg, FL 33702**  
**727 / 570-5312**  
**e-mail: [joyce.mochrie@noaa.gov](mailto:joyce.mochrie@noaa.gov)**

**Tim Price**  
**NMFS Southwest Region**  
**501 West Ocean Blvd, Suite 4200**  
**Long Beach, CA 90802**  
**562 / 980-4029**  
**e-mail: [tim.price@noaa.gov](mailto:tim.price@noaa.gov)**

This collection of information is mandated by the Marine Mammal Protection Act (16 U.S.C. 1387) and by implementing regulations contained at 50 CFR 229.4. The information supplied on this form will be used by the National Marine Fisheries Service to approximate fishing effort in various fisheries which impact marine mammal populations in U.S. waters and to alert vessel owners of applicable rules and regulations regarding the incidental take of marine mammals in commercial fishing operations. Certain information supplied on this form may be considered proprietary and therefore subject to data confidentiality restrictions of 50 CFR Part 229.11.

Public reporting burden for this collection of information is estimated to average 15 minutes per response for new applications and 9 minutes per response for renewals, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Director, Office of Protected Resources, National Marine Fisheries Service, 1315 East-West Highway, Silver Spring, MD 20910, (301) 713-2319.

The National Marine Fisheries Service may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a current and valid OMB control number. The OMB Control number for this form is 0648-0293, which expires on 12/31/1999.

# MARINE MAMMAL AUTHORIZATION PROGRAM

## Registration Form Instructions

**VESSEL NAME:** Enter the name of the vessel as it is identified for commercial fishing operations. For non-vessel fisheries, leave this blank. A SEPARATE REGISTRATION FORM IS REQUIRED FOR EACH VESSEL, OR EACH FIXED GEAR SITE FOR A NON-VESSEL FISHERY.

**LENGTH (FT):** Enter the overall length of the vessel, in feet.

**HOME PORT OF VESSEL - CITY, STATE:** Enter the city and state where the vessel is registered.

**VESSEL STATE REGISTRATION NO./COAST GUARD DOCUMENTATION NO.:** Enter either the vessel's state registration number OR Coast Guard Documentation number. One of these numbers must be provided or an authorization cannot be granted. In the case of non-vessel fisheries, enter the site permit or set-net license number.

**STATE COMMERCIAL VESSEL LICENSE NO.:** Enter the vessel's state commercial fishery vessel license number, if applicable. In Alaska, this is the ADFG commercial fishery vessel license number. In California, this is the CDFG commercial fishery vessel license number.

**PRIMARY VESSEL OWNER:** Enter the vessel owner's last name, first name, and middle initial.

**SECONDARY VESSEL OWNER:** If the vessel is jointly-owned, enter the secondary vessel owner's last name, first name, and middle initial.

**CORPORATE NAME:** If the vessel is owned by a corporation, enter the full legal name of that corporation.

**MAILING ADDRESS, CITY, STATE, ZIP CODE, TELEPHONE NUMBER:** Enter the address that the vessel owner or corporate owner uses for business correspondence. Enter the vessel owner's phone number, including area code.

**OPERATOR:** If the operator of the vessel is different than the owner, enter the operator's last name, first name, and middle initial.

**MAILING ADDRESS, CITY, STATE, ZIP CODE, TELEPHONE NUMBER:** Enter the address that the operator of the vessel uses for business correspondence. Enter the vessel owner's phone number and fax number, including area code.

**FISHERIES CHECKLIST:** Check the circle corresponding to the fishery or fisheries in which you will participate during the next year. Registration for fisheries marked with an asterick(\*) has been integrated with existing state and Federal permitting and licensing programs. If you have a valid permit to participate in any of the fisheries marked with an asterick(\*), you are not required to submit an MMAP registration form and processing fee in order to receive a Marine Mammal Authorization Certificate. However, if you participate in any of the fisheries not marked with an asterick(\*), you must complete this form and mail it to NMFS, along with the \$25 processing fee. If you will not be participating in any of the fisheries identified on the checklist, you do not need to fill out this registration form.

**CERTIFICATION:** The vessel owner or operator must sign and date the registration form. If the form was filled out by someone other than the vessel owner or operator, enter the representative's full name and address.

**MAILING INSTRUCTIONS:** After completing the registration form, mail it, along with a check in the amount of \$25, payable to the *National Marine Fisheries Service*, to the nearest NMFS regional office address listed on page 7. A Marine Mammal Authorization Program certificate and decal will be sent to you in the mail. The decal must be displayed on the port side of the vessel's cabin or hull, and the certificate must be in the possession of the vessel operator while engaged in commercial fishing operations.